





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE RECEIVED

OCT 29 1995

Äpplicant:

Merton Bernfield and Ofer Reizes

TECH CENTER 1609/2980

Serial No.:

08/965,356

Group Art Unit:

1632

Filed:

November 6, 1997

Examiner:

A. Baker

For:

METHODS AND REAGENTS FOR REGULATING OBESITY

Assistant Commissioner for Patents Washington, D.C. 20231

AMENDMENT UNDER 37 C.F.R. § 1.116

Sir:

Responsive to the Office Action mailed July 7, 1999, please amend the application as follows. Submitted with this Amendment and Response is a Verified Statement Claiming Small Entity Status under 37 C.F.R. §§ 1.9(f) and 1.27(d) and a Petition for Extension of Time, with the required fee for a small entity, to extend the period for response one month, to and including November 7, 1999.

It is believed that no additional fee is required with this submission. However, should a an additional fee be required, the Commissioner is hereby authorized to charge any additional fees to Deposit Account No. 01-2507.

00000033 08956356

01 FC:215

55.00 OP

In the Claims

(twice amended) A [non-human] transgenic [animal] rodent genetically engineered to 1. express a syndecan or proteoglycan portions thereof, wherein the [animal] rodent is characterized by an obese phenotype.

1





OF 2 7 1999 DELIGITION

Please type a plus sign (+) inside this box \longrightarrow $\boxed{+}$

PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Typed or printed name

Signature

| Application Number | 08/965,356 | | | |
|------------------------|------------------|--|--|--|
| Filing Date | November 6, 1997 | | | |
| First Named Inventor | Merton Bernfield | | | |
| Group Art Unit | 1632 | | | |
| Examiner Name | A. Baker | | | |
| Attorney Docket Number | CMCC 533 | | | |

| | | ENCLOSURES (check all that ap | piyj | | | | | | |
|--------------------------------------|----------------------------------|--|---|--|--|--|--|--|--|
| Fee Transm | | Assignment Papers (for an Application) | After Allowance Communication to Group | | | | | | |
| Fee A | Attached | Drawing(s) | Appeal Communication to Board of Appeals and Interferences | | | | | | |
| Amendmen | t / Response | Licensing-related Papers | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) | | | | | | |
| X Afte | r Final | Petition Routing Slip (PTO/SB/69) and Accompanying Petition | Proprietary Information | | | | | | |
| Affic | favits/declaration(s) | Petition to Convert to a Provisional Application | Status Letter | | | | | | |
| X Extension of | of Time Request | Power of Attorney, Revocation Change of Correspondence Address | Additional Enclosure(s) (please identify below): | | | | | | |
| Express Ab | andonment Request | Terminal Disclaimer | | | | | | | |
| Information | Disclosure Statement | Small Entity Statement | | | | | | | |
| | | Request for Refund | | | | | | | |
| Document(| opy of Priority s) | Remarks | | | | | | | |
| | to Missing Parts/ Application | - | | | | | | | |
| 1 1 | ponse to Missing | | | | | | | | |
| | s under 37 CFR or 1.53 | | | | | | | | |
| | SIGNATU | RE OF APPLICANT, ATTORNEY, OR | AGENT | | | | | | |
| Firm <i>or</i> Individual name | Patrea L. Pabst Reg. No. 31,284 | | | | | | | | |
| Signature | | | | | | | | | |
| Date | October 25, | 999 | | | | | | | |
| | CERTIFICATE OF MAILING | | | | | | | | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date

October 25, 1999

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an

envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date 10/25/99

unu

Chandra Russell



PTO/SB/17 (12-98)

Approved for use through 09/30/2000. OMB 0651-0302
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

for FY 1999

Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT (\$) \$55.00

| • • | | | | |
|-------------------|--|--|--|--|
| Complete if Known | | | | |
| 08/965,356 | | | | |
| November 6, 1997 | | | | |
| Merton Bernfield | | | | |
| A. Baker | | | | |
| 1632 | | | | |
| CMCC 533 | | | | |
| | 08/965,356 November 6, 1997 Merton Bernfield A. Baker 1632 | | | |

Deposit Account

User ID

01-2507

| METHOD OF PAYMENT (check one) | FEE CALCULATION (continued) | | | | | | |
|--|--|---------------|------------|-------------------------------------|--|---|----------|
| 1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: | 3. AE Large Fee Code | Entity Fee | Sma Fee | AL FE Il Entity Fee e (\$) | У | escription | Fee Paid |
| Deposit Account 01-2507 | 105 | 130 | 205 | 65 | Surcharge - late fil | ing fee or oath | |
| Number Deposit Account Arnall Golden & Gregory, LLP | 127 | 50 | 227 | 25 | Surcharge - late prover sheet. | rovisional filing fee or | |
| Name Charge Any Additional | 139 | 130 | 139 | 130 | Non-English speci | fication | |
| Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | 147 2 | 2,520 | 147 | 2,520 | For filing a reques | t for reexamination | |
| | 112 | 920* | 112 | 920* | Requesting publication | ation of SIR prior to | |
| 2. X Payment Enclosed: X Check Order Other | 113 1 | 1,840* | 113 | 1,840 | | ation of SIR after | |
| | 115 | 110 | 215 | 55 | Extension for reply | within first month | \$55.00 |
| FEE CALCULATION | 116 | 380 | 216 | 190 | Extension for reply | within second mont | h |
| 1. BASIC FILING FEE | 117 | 870 | 217 | 435 | Extension for reply | within third month | |
| Large Entity Small Entity Fee Fee Fee Fee Description | 118 1 | ,360 | 218 | 680 | Extension for reply | within fourth month | |
| Code (\$) Code (\$) Fee Paid | 128 1 | ,850 | 228 | 925 | Extension for reply | within fifth month | |
| 101 760 201 380 Utility filing fee | 119 | 300 | 219 | 150 | Notice of Appeal | | |
| 106 310 206 155 Design filing fee | 120 | 300 | 220 | 150 | Filing a brief in sur | port of an appeal | |
| 107 480 207 240 Plant filing fee | 121 | 260 | 221 | 130 | Request for oral h | earing | |
| 108 760 208 380 Reissue filing fee | 138 1 | 1,510 | 138 | 1,510 | Petition to institute | a public use procee | ding |
| 114 150 214 75 Provisional filing fee | 140 | 110 | 240 | 55 | Petition to revive - | unavoidable | |
| SUBTOTAL (1) (\$) | 141 1 | 1,210 | 241 | 605 | Petition to revive - | unintentional | |
| 2. EXTRA CLAIM FEES | 142 1 | | 242 | | Utility issue fee (or | r reissue) | |
| Fee from Ext <u>ra Claims below Fee Paid</u> | 143 | 430 | 243 | 215 | Design issue fee | | |
| Total Claims 25 = 0 x = 0 | 144 | 580 | 244 | 290 | Plant issue fee | | |
| Independent 5 = 0 x | 122 | 130 | 122 | 130 | Petitions to the Co | mmissioner | |
| Claims Autiple Dependent | 123 | 50 | 123 | 50 | Petitions related to | provisional applicat | ions |
| | 126 | 240 | 126 | 240 | Submission of Info | rmation Disclosure S | Stmt - |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$) | 581 | 40 | 581 | 40 | | atent assignment per mber of properties) | |
| 103 18 203 9 Claims in excess of 20 | 146 | 760 | 246 | 380 | | n after final rejection | |
| 102 78 202 39 Independent claims in excess of 3 | | | | | (37 ČFR 1.129(a)) | | |
| 104 260 204 130 Multiple dependent claim, if not paid | 149 | 760 | 249 | 380 | For each additionate examined (37 CFF | | |
| 109 78 209 39 ** Reissue independent claims over original patent | Other fe | ee (sp | ecify) | | | | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent | **Represents the difference between the fee for a month | | | | | , | |
| SUBTOTAL (2) (\$) -0- | extension of time and amonth extension of time. Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)55.00 | | | | | \$)55.00 | |
| | | | | | | | |
| Typed or Polyant Polya | | | | | | | |
| Printed Name Patrea L. Pabst | | | | | | Reg. Number | 31,284 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date 10/25/99

Signature